

## CLAIMS ONLY

Application Number  
10179018/

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
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49						
50						
Total Indep			2			
Total Depend			11			
Total Claims			13			

Indep	Depend	Indep	Depend	Indep	Depend
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99					
100					
Total Indep					
Total Depend					
Total Claims					

117106

2

11

13

1

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